

# GROW AMERICA FUND

## DIFFERENT FROM CONVENTIONAL LENDERS. AND PROUD OF IT.

The Grow America Fund (GAF) provides capital to support job creation and the growth of small businesses in underserved areas, particularly for minority- and women-owned businesses. We value community development over corporate profit. We charge no fees for our work with borrowers.

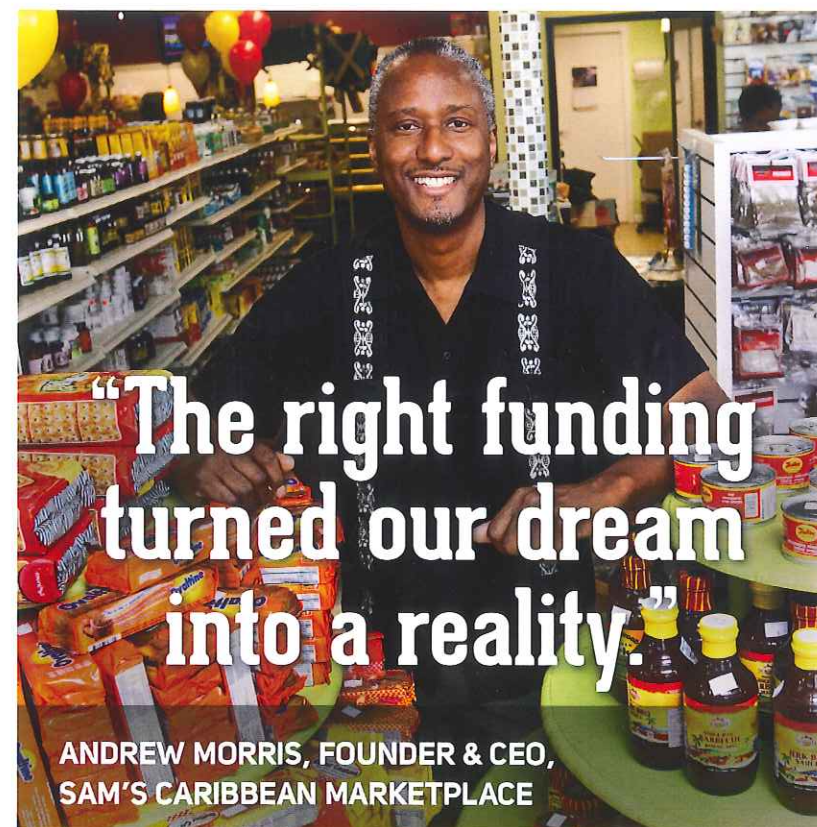
**OUR MISSION** To provide longer-term, lower-interest small business loans that create jobs, stimulate investment, and build small businesses that are beyond a conventional lender's profile in low-income communities across the country.

**OUR EXPERIENCE** GAF is the small business lending arm of the National Development Council (NDC), founded in 1969 and the oldest national nonprofit community development organization in the country. GAF has underwritten small business loans since 1992.

**OUR FOCUS** Through NDC's local partners nationwide, GAF works to create economic opportunity in low-income communities by offering financing and technical assistance to small businesses, especially minority- and women-owned businesses.

**OUR BACKING** GAF loans are 75% - 90% guaranteed by the U.S. Small Business Administration (SBA). We are an SBA-licensed small business lending company owned and operated by a nonprofit organization. GAF has Preferred Lender status nationwide.

**OUR DIFFERENCE** GAF loans offer longer terms, larger loan amounts, lower down payments, and lower interest rates than conventional loans. We also match the loan term to the life of assets being financed, ensuring that debt service does not exceed available cash flow.



ANDREW MORRIS, FOUNDER & CEO,  
SAM'S CARIBBEAN MARKETPLACE

Andrew had long outgrown his 1600-square-foot leased facility, but he did not fit a conventional lender's profile. Grow America Fund saw the potential in his business and secured him a \$980,000 loan to expand his marketplace to 4000 square feet.



## GAF OFFERS A FULL RANGE OF SUPPORT SERVICES

**ONE-ON-ONE COUNSELING AND TECHNICAL ASSISTANCE** GAF offers counseling at no cost to each borrower before and during the course of the loan, because we believe that technical assistance is just as important as financing.

**PRE-LOAN DEVELOPMENT** Working one-on-one with borrowers, GAF Loan Officers thoroughly review each step of the proposed loan and its consequences, both intended and unintended, on the business's financial structure. We analyze capital budgets to determine their adequacy and help review bids from contractors.

**LOAN CLOSING DEVELOPMENT** GAF's closing team provides technical assistance once the GAF Loan Committee approves the loan request. Loan closings can be confusing and intimidating, especially for a new borrower. We help the borrower assemble all due diligence and loan closing documents. We also work with any outside parties to facilitate the closing process.

**CONSTRUCTION PHASE DEVELOPMENT** As part of the NDC, GAF has many resources at its fingertips. NDC has assisted businesses in getting \$2 billion worth of construction projects built and completed on time. Most borrowers have never managed commercial construction and are unequipped to deal with general contractors.

**POST-LOAN DEVELOPMENT** One-on-one time with the borrower post-loan is important so we can assist with their current growth phase and ensure long-term stability as they implement expansion plans with our financing. Most expanding businesses need help developing disciplines and processes for success.

**CLASSROOM TRAINING** GAF offers potential and current borrowers business development training called "Cash Reigns Supreme." This half-day course, which focuses on how cash flows through a business, is offered on demand. "Cash Reigns Supreme" is taught by GAF's best Loan Officers and Portfolio Managers, who have broad experience in economic development finance.



# Grow Shreveport Fund

## Financing for Small Business



The Grow Shreveport Fund is a unique economic development partnership among the City of Shreveport and the National Development Council (NDC), one of the nation's oldest economic development nonprofit organizations.

NDC is a nationally recognized Small Business Lending Company licensed by the Small Business Administration (SBA) and is also a Community Development Financial Institution (CDFI) as designated by the United States Department of the Treasury, CDFI Fund. Loans are administered through NDC's wholly-owned affiliate, the Grow America Fund (GAF).

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### How the Grow Shreveport Fund operates:

The City of Shreveport and NDC have established and capitalized the Grow Shreveport Fund as an economic development tool designed to assist eligible small businesses within the city to obtain the financing required to grow their small businesses.

The Grow Shreveport Fund operates as a community development lender to support the creation of jobs and the expansion of eligible small businesses in underserved areas, particularly minority and women-owned businesses.

Loans made under this program will be underwritten by GAF and guaranteed by the SBA, so each loan must comply with SBA guidelines and procedures.

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### What are the advantages of this program?

- Longer terms equal to the lives of the assets being financed. (Up to 25 years for real estate, and 10 years for equipment and permanent working capital.)
- Low equity requirements.
- Lower interest rates (variable or fixed)
- Flexible underwriting criteria.
- Limited or no pre-payment penalties.
- Loans tailored to individual borrowers.

### Who is the ideal borrower?

- A business that has been in operation for three or more years.
- A for-profit business located in the City of Shreveport
- A business with a financing need above \$100,000.
- A business with historical cash flow to service debt.
- A business which will create or retain jobs as a result of the loan.
- *Nonprofits, real estate developers, banks, and investment advisory firms are ineligible.*

### What are eligible uses of the funds?

- Permanent working capital.
- Refinancing of non-SBA debt.

- Leasehold improvements.
- Property acquisition.
- Machinery & equipment.
- *Funds cannot be used for equity needs, research and development, or as venture capital.*

### What are other requirements?

- Any owner with over a 20% interest must provide a personal guarantee.
- A loan must be collateralized with available assets, to the extent possible.
- Demonstrated ability to repay a loan with existing or projected cash flow.

### What should be submitted?

- Three years of tax returns, personal.
- Three years of tax returns, corporate.
- Interim income statement and balance sheet.
- Debt schedule.
- One year of projections.
- Management experience, resumes.
- Credit release form.

For more information, please contact:

Tess Lee

Grow America Fund

[tlee@nationaldevelopmentcouncil.org](mailto:tlee@nationaldevelopmentcouncil.org)

214-533-5889

# Loan Application Checklist



Grow America Fund (GAF) is a NYC-based Community Development Financial Institution focused on providing flexible and patient expansion loans to healthy and growing small businesses, manufacturers and distributors. GAF is an approved SBA 7(a) PLP lender and follows appropriate SBA lending practices.

## WHAT DO I NEED TO SUBMIT IN ORDER TO BE CONSIDERED FOR A LOAN?

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In order to properly review your loan request, please submit the following items:

1. Attached Loan Intake form.
2. 2010, 2011 and 2012 Federal Tax Returns (please provide entire copy) for primary business applicant, and any other affiliated companies.  
Note: If the business has not yet filed 2012 tax returns, submit 2009, 2010 and 2011 returns, along with year-end statements.
3. 2013 interim financial statements not older than 60 days, including:
  - a. Income Statement and Balance Sheet
  - b. A/R Aging report
  - c. A/P Aging report(Please ensure all reports cover consistent time frames.)
4. Current debt schedule **(template attached)**
5. Completed SBA and GAF forms **(attached)**
  - SBA Form 413 – Personal Financial Statement for any principal with 20% or greater ownership
  - SBA Form 912 – Statement of Personal History for every principal with 20% or greater ownership
  - Completed GAF credit release form
6. Information relating to the project (ie: construction proposals, equipment estimates, etc.)

**You may reach out with questions, or submit these items via:**

**Email:** [TLee@nationaldevelopmentcouncil.org](mailto:TLee@nationaldevelopmentcouncil.org)  
**Contact:** (214) 533-5889 (fax 214-853-5903)  
**Mail:** Tess Lee, Grow America Fund  
3006 Santa Anna  
Dallas, TX 75228

# Small Business Loan Intake Form



The Grow America Fund (GAF) is a NYC-based Community Development Financial Institution focused on providing flexible and patient expansion loans to healthy and growing small businesses, manufacturers, and distributors. GAF is an approved SBA 7(a) PLP lender and follows appropriate SBA lending practices.

Referral Source (Name, Organization):	Date:
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## Applicant Information

Name:	Phone:	U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No
Business Legal Name:	DBA:	
Business Street Address:		
City:	State:	Zip:
Email:	Website:	

## Business Characteristics

Industry: <input type="checkbox"/> Manufacturer <input type="checkbox"/> Distributor <input type="checkbox"/> Retail <input type="checkbox"/> Services <input type="checkbox"/> Food/Restaurant <input type="checkbox"/> Other _____		
Entity Type: <input type="checkbox"/> C-Corp <input type="checkbox"/> S-Corp <input type="checkbox"/> LLC <input type="checkbox"/> Partnership <input type="checkbox"/> Sole Proprietorship <input type="checkbox"/> Nonprofit <input type="checkbox"/> Other _____		
Brief Description of Business:		
Year Business Est. (e.g. 2005):	Owner (Optional): <input type="checkbox"/> Minority <input type="checkbox"/> Woman <input type="checkbox"/> Veteran <input type="checkbox"/> Living with Disabled	
Previous Years Gross Revenue: \$	YTD Revenue: \$ _____ Months	
Net Income: \$	Current Full Time Employees:	Projected Employees:

## Credit and Loan Information

Use of Funds	Amounts	Loan Amount Requested: \$
Real Property Acquisition	\$	Equity Contribution: \$
Leasehold Improvements	\$	Credit Score:
Machinery & Equipment	\$	Current Bank Relationship:
Working Capital	\$	Comments (Optional):
Other _____	\$	
<b>TOTAL</b>	\$	

# Debt Schedule



Business Name:

As of Date:

Note: Include ALL business debt including (but not limited to): term loans, lines of credit, tax liens, landlord payments, franchise payments, subordinated officer debt, etc.

Creditor Name	Current Balance	Original Loan Amount	Average Monthly Payment	Month/ Year Initiated	Term	Interest Rate	Collateral	How funds were used?

# Credit Release Form



I/We hereby request and authorize you to release to Grow America Fund, Inc. and/or the National Development Council for verification purposes, personal and corporate credit reports and information concerning the company/corporation/partnership and/or the officers and individuals listed below. That information may include but is not limited to:

- a. Employment history dates, title, income, hours worked, ect.
- b. Banking (checking and saving) accounts of record
- c. Mortgage loan rating (opening date, high credit, payment amount, loan balance, and payments)
- d. Any information deemed necessary in connection with a consumer credit report for my loan application

This information is for the confidential use of this lender, Grow America Fund, Inc. (GAF) in compiling a loan report. A photographic or carbon copy of this authorization (being a photographic or carbon copy of the signature(s) of the undersigned), may be deemed to be the equivalent of the original and may be used as a duplicate original.

Date: \_\_\_\_\_

## Application Information

Business Name:
Phone Number:
Affiliated Business:
Phone Number:

## Individual 1

Name of Officer/Owner:	
Address for last two Years:	
Social Security #:	Date of Birth:
Signature: X	

## Individual 2

Name of Officer/Owner:	
Address for last two Years:	
Social Security #:	Date of Birth:
Signature: X	

## Individual 3

Name of Officer/Owner:	
Address for last two Years:	
Social Security #:	Date of Birth:
Signature: X	



**United States of America**  
**SMALL BUSINESS ADMINISTRATION**  
**STATEMENT OF PERSONAL HISTORY**

**Please Read Carefully :** SBA uses Form 912 as one part of its assessment of program eligibility. Please reference SBA Regulations and Standard Operating Procedures if you have any questions about who must submit this form and where to submit it. For further information, please call SBA's Answer Desk at 1-800-U-ASK-SBA (1-800-827-5722), or check SBA's website at [www.sba.gov](http://www.sba.gov).

Name and Address of Applicant (Firm Name)(Street, City, State, and ZIP Code)		SBA District/Disaster Area Office	
1. Personal Statement of: (State name in full, if no middle name, state (NMN), or if initial only, indicate initial.) List all former names used, and dates each name was used. Use separate sheet if necessary.  <div style="display: flex; justify-content: space-between;"> <span><b>First</b></span> <span><b>Middle</b></span> <span><b>Last</b></span> </div>		<div style="display: flex;"> <div style="flex: 1;">           2. Give the percentage of ownership or stock owned or to be owned in the small business or the development Company         </div> <div style="flex: 1; border-left: 1px solid black; padding-left: 5px;">           Social Security No.         </div> </div>	
Name and Address of participating lender or surety co. (when applicable and known)		3. Date of Birth (Month, day, and year)	
6. Present residence address: From: To: Address:  Home Telephone No. (Include Area Code): Business Telephone No. (Include Area Code):		4. Place of Birth: (City & State or Foreign Country)  5. U.S. Citizen? <input type="checkbox"/> Yes <input type="checkbox"/> No INITIALS: _____ If No, are you a Lawful Permanent resident alien: <input type="checkbox"/> Yes <input type="checkbox"/> No If non-U.S. citizen, provide alien registration number:	
<p><b>PLEASE SEE REVERSE SIDE FOR EXPLANATION REGARDING DISCLOSURE OF INFORMATION AND THE USES OF SUCH INFORMATION. YOU MUST INITIAL YOUR RESPONSES TO QUESTIONS 5,7,8 AND 9.</b></p> <p><b>IF YOU ANSWER "YES" TO 7, 8, OR 9, FURNISH DETAILS ON A SEPARATE SHEET. INCLUDE DATES, LOCATION, FINES, SENTENCES, WHETHER MISDEMEANOR OR FELONY, DATES OF PAROLE/PROBATION, UNPAID FINES OR PENALTIES, NAME(S) UNDER WHICH CHARGED, AND ANY OTHER PERTINENT INFORMATION. AN ARREST OR CONVICTION RECORD WILL NOT NECESSARILY DISQUALIFY YOU; HOWEVER, UNTRUTHFUL ANSWER WILL CAUSE YOUR APPLICATION TO BE DENIED AND SUBJECT YOU TO OTHER PENALTIES AS NOTED BELOW.</b></p>			
7. Are you presently under indictment, on parole or probation? INITIALS: _____ <input type="checkbox"/> Yes <input type="checkbox"/> No (If yes, indicate date parole or probation is to expire.) _____			
8. Have you <b>ever</b> been charged with and or arrested for any criminal offense other than a minor motor vehicle violation? Include offenses which have been dismissed, discharged, or not prosecuted (All arrests and charges must be disclosed and explained on an attached sheet.) <input type="checkbox"/> Yes <input type="checkbox"/> No INITIALS: _____			
9. Have you <b>ever</b> been convicted, placed on pretrial diversion, or placed on any form of probation, including adjudication withheld pending probation, for any criminal offense other than a minor vehicle violation? <input type="checkbox"/> Yes <input type="checkbox"/> No INITIALS: _____			
10. I authorize the Small Business Administration Office of Inspector General to request criminal record information about me from criminal justice agencies for the purpose of determining my eligibility for programs authorized by the Small Business Act, and the Small Business Investment Act.			
<p><b>CAUTION - PENALTIES FOR FALSE STATEMENTS:</b> Knowingly making a false statement on this form is a violation of Federal law and could result in criminal prosecution, significant civil penalties, and a denial of your loan, surety bond, or other program participation. A false statement is punishable under 18 USC 1001 AND 3571 by imprisonment of not more than five years and/or a fine of up to \$250,000; under 15 USC 645 by imprisonment of not more than two years and/or a fine of not more than \$5,000; and, if submitted to a Federally insured institution, under 18 USC 1014 by imprisonment of not more than thirty years and/or a fine of not more than \$1,000,000.</p>			
Signature		Title	
Date		Date	
<b>Agency Use Only</b> 11. <input type="checkbox"/> Fingerprints Waived <input type="checkbox"/> Fingerprints Required Date Sent to OIG _____ Date _____ Approving Authority _____		12. <input type="checkbox"/> Cleared for Processing Date _____ Approving Authority _____ 13. <input type="checkbox"/> Request a Character Evaluation Date _____ Approving Authority _____ (Required whenever 7,8 or 9 are answered "yes" even if cleared for processing)	
Please Note: The estimated burden for completing this form is 15 minutes per response. You are not required to respond to any collection of information unless it displays a currently valid OMB approval number. Comments on the burden should be sent to U.S. Small Business Administration, Chief, AIB, 409 3rd St. S.W., Washington, D.C. 20416 and Desk Officer for the Small Business Administration, Office of Management and Budget, New Executive Office Building, Room 10202, Washington, D.C. 20503. OMB Approval 3245-0178. <b>PLEASE DO NOT SEND FORMS TO OMB</b>			





# PERSONAL FINANCIAL STATEMENT

U.S. SMALL BUSINESS ADMINISTRATION

As of \_\_\_\_\_

Complete this form for: (1) each proprietor; (2) general partner; (3) managing member of a limited liability company (LLC); (4) each owner of 20% or more of the equity of the Applicant (including the assets of the owner's spouse and any minor children); and (5) any person providing a guaranty on the loan. Return completed form to: 7(a) loans - to the lender processing the SBA application; 504 loans - to the Certified Development Company processing the SBA application; Disaster loans - to the Disaster Processing and Disbursement Center at 14925 Kingsport Road, Fort Worth, TX 76155 -2243; and 8(a)/ BD applicants who are *individuals claiming social and economic disadvantaged status and their spouses* - electronically at <http://www.sba.gov> or send hard copy with paper application to either of the two following offices:

8(a) BD only	<b>Mail to the following address, if your firm is located in one of the states below:</b>	<b>Mail to the following address, if your firm is located in one of the states below:</b>
	US Small Business Administration DPCE Central Office Duty Station Parkview Towers 1150 First Avenue 10th Floor, Suite 1001 King of Prussia, PA 19406	Small Business Administration Division of Program Certification and Eligibility 455 Market Street, 6th Floor San Francisco, CA 94105
	MA, ME, NH, CT, VT, RI, NY, PR (Puerto Rico), VI (US Virgin Islands), NJ, PA, MD, VA, WV, DC, D E, GA, AL, NC, SC, MS, FL, KY, TN	IL, OH, MI, IN, MN, WI, TX, NM, AR, LA, OK, MO, IA

Name	Business Phone
Residence Address	Residence Phone
City, State, & Zip Code	

ASSETS		LIABILITIES	
	(Omit Cents)		(Omit Cents)
Cash on hand & in Banks .....	\$ _____	Accounts Payable .....	\$ _____
Savings Accounts .....	\$ _____	Notes Payable to Banks and Others .....	\$ _____
IRA or Other Retirement Account .....	\$ _____	(Describe in Section 2)	
(Describe in Section 5)		Installment Account (Auto) .....	\$ _____
Accounts & Notes Receivable .....	\$ _____	Mo. Payments \$ _____	
(Describe in Section 5)		Installment Account (Other) .....	\$ _____
Life Insurance -Cash Surrender Value Only .....	\$ _____	Mo. Payments \$ _____	
(Complete Section 8)		Loan on Life Insurance .....	\$ _____
Stocks and Bonds .....	\$ _____	Mortgages on Real Estate .....	\$ _____
(Describe in Section 3)		(Describe in Section 4)	
Real Estate .....	\$ _____	Unpaid Taxes .....	\$ _____
(Describe in Section 4)		(Describe in Section 6)	
Automobiles - Total Present Value .....	\$ _____	Other Liabilities .....	\$ _____
(Describe in Section 5, and include Year/Make/Model)		(Describe in Section 7)	
Other Personal Property .....	\$ _____	Total Liabilities .....	\$ _____
(Describe in Section 5)		Net Worth .....	\$ _____
Other Assets .....	\$ _____		
(Describe in Section 5)			
<b>Total</b>	\$ _____	<b>Total</b>	\$ _____

<b>Section 1. Source of Income</b>	<b>Contingent Liabilities</b>
Salary .....	As Endorser or Co -Maker .....
Net Investment Income .....	Legal Claims & Judgments .....
Real Estate Income .....	Provision for Federal Income Tax .....
Other Income (Describe below)* .....	Other Special Debt .....

Description of Other Income in Section 1.

\*Alimony or child support payments need not be disclosed in "Other Income" unless it is desired to have such payments counted toward total income.



<b>Section 2. Notes Payable to Banks and Others.</b> (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed.)					
Name and Address of Noteholder(s)	Original Balance	Current Balance	Payment Amount	Frequency (monthly, etc.)	How Secured or Endors ed Type of Collateral

<b>Section 3. Stocks and Bonds. (Use attachments if necessary. Each attachment must be identified as a part of this statement and signed).</b>					
Number of Shares	Name of Securities	Cost	Market Value Quotation/Exchange	Date of Quotation/Exchange	Total Value

<b>Section 4. Real Estate Owned.</b>	(List each parcel separately. Use attachment if necessary. Each attachment must be identified as a part of this statement and signed.)		
	Property A	Property B	Property C
Type of Real Estate (e.g. Primary Residence, Other Residence, Rental Property, Land, etc.)			
Address	MM		
Date Purchased			
Original Cost			
Present Market Value			
Name & Address of Mortgage Holder			
Mortgage Account Number			
Mortgage Balance			
Amount of Payment per Month/Year	/	/	/
Status of Mortgage			

<b>Section 5. Other Personal Property and Other Assets.</b>	(Describe, and if any is pledged as security, state name and address of lien holder, amount of lien, terms of payment and if delinquent, describe delinquency)

<b>Section 6. Unpaid Taxes.</b>	(Describe in detail, as to type, to whom payable, when due, amount, and to what property, if any, a tax lien attaches.)

<b>Section 7. Other Liabilities.</b>	(Describe in detail.)

**Section 8. Life Insurance Held.** (Give face amount and cash surrender value of policies - name of insurance company and beneficiaries)

I authorize SBA/Lender to make inquiries as necessary to verify the accuracy of the statements made and to determine my creditworthiness.  
**CERTIFICATION:** (to be completed by each person submitting the information requested on this form)

By signing this form, I certify under penalty of criminal prosecution that all information on this form and any additional supporting information submitted with this form is true and complete to the best of my knowledge. I understand that SBA or its participating Lenders, or Certified Development Companies will rely on this information when making decisions regarding an application for a loan from SBA or an SBA Participating Lender, or for participation in the SBA 8(a) Business Development (BD) program.

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_ Social Security No. \_\_\_\_\_

Signature \_\_\_\_\_ Date \_\_\_\_\_

Print Name \_\_\_\_\_ Social Security No. \_\_\_\_\_

**NOTICE TO LOAN APPLICANTS: CRIMINAL PENALTIES AND ADMINISTRATIVE REMEDIES FOR FALSE STATEMENTS:**

Knowingly making a false statement on this form is a violation of Federal law and could result in criminal prosecution, significant civil penalties, and a denial of your loan. A false statement is punishable under 18 U.S.C. §§ 1001 and 3571 by imprisonment of not more than five years and/or a fine of up to \$250,000; under 15 U.S.C. § 645 by imprisonment of not more than two years and/or a fine of not more than \$5,000; and, if submitted to a Federally insured institution, a false statement is punishable under 18 U.S.C. § 1014 by imprisonment of not more than 30 years and/or a fine of not more than \$1,000,000.

**NOTICE TO APPLICANTS OR PARTICIPANTS IN THE 8(a) BD PROGRAM : CRIMINAL PENALTIES AND ADMINISTRATIVE REMEDIES FOR FALSE STATEMENTS:**

Any person who misrepresents a business concern's status as an 8(a) Program participant or SDB concern, or makes any other false statement in order to influence the 8(a) certification or other review process in any way (e.g., annual review, eligibility review), shall be: (1) Subject to fines and imprisonment of up to 5 years, or both, as stated in Title 18 U.S.C. § 1001; (2) subject to fines of up to \$500,000 or imprisonment of up to 10 years, or both, as stated in Title 15 U.S.C. § 645; (3) Subject to civil and administrative remedies, including suspension and debarment; and (4) Ineligible for participation in programs conducted under the authority of the Small Business Act.

PLEASE NOTE: The estimated average burden hours for the completion of this form is 1.5 hours per response. If you have questions or comments concerning this estimate or any other aspect of this information, please contact Chief, Administrative Branch, U.S. Small Business Administration, Washington, D.C. 20416, and Clearance Officer, Paper Reduction Project (3245 -0188), Office of Management and Budget, Washington, D.C. 20503. **PLEASE DO NOT SEND FORMS TO OMB.**